

United States Department of Interior

National Park Service Joshua Tree National Park 74485 National Park Drive Twentynine Palms, CA 92277-3597

A8219

ENTRANCE FEE WAIVER FOR EDUCATIONAL STUDY

SCHOOL NAME:		
Street:		
City:	State:	Zip:
Entrance Date:	Departure Date:	
Number in party:	Number of vehicles	
SUBJECT:		
INSTRUCTOR:	PHONE:	
Describe your course syllabus and how it related	es to the resources o	f Joshua Tree National Park:
I understand the Code of Federal Regulations a educational or scientific institutions who are us NOT RECREATION. I hereby certify the ab requests entrance fees be waived.	sing the park for the	STUDY OF RESOURCES -
Signature:	Date:	Title:
**************************************	*******	*********
Proof of accreditation Proof of curricula		
THIS FORM MUST BE SIGNED TO BE VAI	LID	
Fee Program Coordinator:		Date:

Each vehicle must have a copy of this waiver before entering the park.